

EXHIBIT 4

THIS NOTICE RELATES TO A PROOF OF CLAIM YOU FILED AGAINST THE GOVERNMENT OF PUERTO RICO IN ITS PROCEEDINGS UNDER THE PUERTO RICO OVERSIGHT, MANAGEMENT, AND ECONOMIC STABILITY ACT.

IF YOU ARE RECEIVING THIS NOTICE, ONE OR MORE OF THE DEBTORS ARE SEEKING TO DISALLOW YOUR CLAIM FOR THE REASON LISTED BELOW.

DOCUMENTS RELATING TO THIS CLAIM OBJECTION WERE MAILED TO YOU ON APRIL 17, 2020. PURSUANT TO DETAILS SET FORTH IN EXHIBIT "C" TO THE OBJECTION, THE DEADLINE TO RESPOND IS MAY 19, 2020. PLEASE CHECK YOUR MAIL BOX. IF YOU FAIL TO PROPERLY RESPOND TO THE OBJECTION, THE COURT MAY GRANT THE RELIEF REQUESTED BY THE GOVERNMENT WITHOUT FURTHER NOTICE OR HEARING.

NAME	CLAIM #	DATE FILED	DEBTOR	ASSERTED CLAIM AMOUNT
RUIZ NOGUERAS, ADONIS	2406	3/12/18	Commonwealth of Puerto Rico	\$1,780.00
Docket Number	12865	Objection Title	One Hundred Ninety-Third Omnibus Objection (Non-Substantive) of the Commonwealth of Puerto Rico, Puerto Rico Highways and Transportation Authority, and Employees Retirement System of the Government of the Commonwealth of Puerto Rico to Satisfied Claims	
Reason:	X	Proof of Claim asserts liability on the basis of a tax refund/return. The records of the Department of Treasury show such refund/return has been fully satisfied, pursuant to Direct Deposit dated 06/15/2017. [handwritten:] I have not received the money from the claim. The payment that came into my account was a refund from the 2016 Income Tax Return.		

LA PRESENTE NOTIFICACIÓN ESTÁ RELACIONADA CON UNA EVIDENCIA DE RECLAMO QUE USTED PRESENTÓ CONTRA EL GOBIERNO DE PUERTO RICO EN EL PROCESO QUE SE SUSTANCIA EN VIRTUD DE LA LEY DE SUPERVISIÓN, ADMINISTRACIÓN Y ESTABILIDAD FINANCIERA DE PUERTO RICO.

SI USTED RECIBE ESTA NOTIFICACIÓN ES PORQUE UNO O MÁS DE LOS DEUDORES PRETENDEN DESESTIMAR SU RECLAMO POR LA RAZÓN EXPUESTA A CONTINUACIÓN.

LOS DOCUMENTOS RELACIONADOS CON ESTA OBJECCIÓN DE RECLAMO LE FUERON ENVIADOS A USTED POR CORREO EL DÍA 17 DE ABRIL DE 2020. DE ACUERDO CON LOS DATOS ESTABLECIDOS EN EL ANEXO "C" A LA OBJECCIÓN, LA FECHA LÍMITE PARA RESPONDER ES EL 19 DE MAYO DE 2020. SÍRVASE POR FAVOR VERIFICAR SU CASILLA DE CORREO. SI NO RESPONDE APROPIADAMENTE A LA OBJECCIÓN, EL TRIBUNAL PODRÍA OTORGAR LA REPARACIÓN SOLICITADA POR EL GOBIERNO SIN PREVIO AVISO NI AUDIENCIA.

NOMBRE	N.º DE RECLAMACIÓN	FECHA DE PRESENTACIÓN	DEUDOR	MONTO DE LA RECLAMACIÓN ALEGADA
RUIZ NOGUERAS, ADONIS	2406	3/12/18	Commonwealth of Puerto Rico	\$1,780.00
Número de registro de actos procesales	12865	Título de la objeción	One Hundred Ninety-Third Omnibus Objection (Non-Substantive) of the Commonwealth of Puerto Rico, Puerto Rico Highways and Transportation Authority, and Employees Retirement System of the Government of the Commonwealth of Puerto Rico to Satisfied Claims	
Base para:	La Evidencia del Reclamo reclama una obligación con base en un reembolso/devolució de impuestos. Los registros del Departamento del Tesoro indican que dicho reembolso/devolución se ha completado totalmente mediante un depósito directo de fecha 15 de junio de 2017.			



[handwritten:] 12 May 2020

***CUST PR 1845 SRF 41414 PackID: 1118 MMLID: 502091 SVC: 193rd
Omni
RUIZ NOGUERAS, ADONIS
URB MONTE MAR
3 CALLE B
FAJARDO, PR 00738

COPIES OF THE OMNIBUS OBJECTION AND ALL OTHER FILINGS IN THE TITLE III CASES ARE AVAILABLE FREE ONLINE AT <https://cases.primeclerk.com/puertorico> OR UPON REQUEST BY CALLING THE NUMBER SET FORTH BELOW.

If you have questions, please contact Prime Clerk LLC at (844) 822-9231 (toll free for U.S. and Puerto Rico) or (646) 486-7944 (for international callers), available 10:00 a.m. to 7:00 p.m. (Atlantic Standard Time) (Spanish available).

COPIAS DE LA OBJECCIÓN GLOBAL, Y TODOS LOS ESCRITOS RADICADOS EN EL MARCO DE LAS CAUSAS CONFORME AL TÍTULO III, ESTÁN DISPONIBLES, DE MANERA GRATUITA, EN <https://cases.primeclerk.com/puertorico> O PREVIA SOLICITUD LLAMANDO AL NÚMERO QUE SE INDICA DEBAJO.

Si tiene alguna pregunta, comuníquese con Prime Clerk LLC llamando al (844) 822-9231 (número gratuito para Estados Unidos y Puerto Rico) o (646) 486-7944 (para llamadas desde el extranjero), disponible entre las 10:00 a.m. y las 07:00 p.m. (AST) (hablamos español).

Government of Puerto Rico

Department of the Treasury

Planilla de Contribución sobre Ingresos de Individuos
Confirmación de Radicación ElectrónicaIndividual Income Tax Return
Confirmation of Electronic Filing

Año 2016 - Tax Year 2016

Nombre del Contribuyente	ADONIS RUIZ NOGUERAS
Taxpayer Name	
Número de Seguro Social del Contribuyente	REDACTED 2244
Taxpayer Social Security Number	
Nombre del Cónyuge	NILDA L MENDEZ MARCANO
Spouse Name	
Número de Seguro Social del Cónyuge	REDACTED 2819
Spouse Social Security Number	
Número de Confirmación	032220170813899E8A1131227
Confirmation Number	
Fecha y Hora de Radicación	22/03/2017 08:14:50 PM
Date and Time of Filing	
Fecha de Pago	
Payment Date	
Cantidad Pagada Electrónicamente	
Amount Paid Electronically	
Número de Ruta / Tránsito	
Routing Number	
Número de Cuenta	
Account Number	
Balance Pendiente de Pago	
Amount Due	
Contribución Pagada en Exceso	1,780
Amount Overpaid	
<input type="checkbox"/> Acreditar a Contribución Estimada del Próximo Año	
Credit to Estimated Tax for Next Year	
<input type="checkbox"/> Aportación al Fondo Especial para el Estuario de la Bahía de San Juan ..	
Amount to be Contributed to the San Juan Bay Estuary Special Fund	
<input type="checkbox"/> Aportación al Fondo Especial para la Universidad de Puerto Rico	
Amount to be Contributed to the University of Puerto Rico Special Fund	
<input type="checkbox"/> Cantidad a Reintegrar	1,780
Refund Amount	

- ☐ Mediante cheque por correo - Via check by mail
- ☒ Mediante depósito directo - Via direct deposit

Username: REDACTED
Password:Período de Conservación: Diez (10) años
Retention Period: Ten (10) years

PRSoft, Inc. (www.prsoft.com)

Form 482.0 Rev. 16 Nov 16

UNIQUE FORM		2016		2016		Serial Number	
Liquidator		Reviewer		GOVERNMENT OF PUERTO RICO DEPARTMENT OF THE TREASURY			
R G RO V1 V2 P1 P2 N D1 D2 E A M		INDIVIDUAL INCOME TAX RETURN FOR CALENDAR YEAR 2016 OR TAXABLE YEAR BEGINNING ON				<input type="checkbox"/> AMENDED RETURN <input type="checkbox"/> DECEASED DURING THE YEAR: Day Month Year <input type="checkbox"/> TAXPAYER <input type="checkbox"/> SPOUSE <input type="checkbox"/> SURVIVING SPOUSE FILES ANOTHER RETURN FOR THE TAXABLE YEAR (Submit social security number and date of death of the deceased spouse: Day Month Year)	
Taxpayer's Name ADONIS		Last Name RUIZ		Second Last Name NOGUERAS		Taxpayer's Social Security Number Redacted -2244	
Postal Address Urb. MONTE MAR 3 Calle B Fajardo PR		Zip Code 00738		Date of Birth 16 8 1967 Day Month Year		Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F	
Spouse's First Name and Initial NILDA L		Last Name MENDEZ		Second Last Name MARCANO		Spouse's Social Security Number Redacted -2819	
Home Address (Town or Urbanization, Number, Street) Urb MONTE MAR 3 Calle B Fajardo PR		Zip Code 00738		Spouse's Date of Birth 7 4 1969 Day Month Year		Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F	
E-Mail Address adruonix@hotmail.com				Home Telephone (787) 342-0914		Work Telephone	
CHANGE OF ADDRESS: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				EXTENSION OF TIME: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Receipt Stamp 03/22/2017 08:14:50 PM	
Questionnaire A. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO United States Citizen? (See instructions) B. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Resident of Puerto Rico during the entire year? If "No", indicate one of the following: 1. <input type="checkbox"/> Date moved to PR. (Day Month Year) 2. <input type="checkbox"/> Date moved from PR. (Day Month Year) 3. <input type="checkbox"/> Nonresident during the entire year C. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Did you generate income during the period that you were not resident of PR that is not included on this return? (If you answered "Yes", indicate the amount): 1. <input type="checkbox"/> Attributable to the taxpayer \$ 2. <input type="checkbox"/> Attributable to the spouse \$ 3. <input type="checkbox"/> Other excluded or tax exempt income (Submit Schedule IE Individual) D. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Resident individual investor? (Submit Schedule IE Individual) E. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Partner of a partnership subject to tax under the Federal Internal Revenue Code? F. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Active military service in a combat zone during the taxable year? (Date in which you ceased in the service: Day Month Year) Your occupation PASTOR 8110 Spouse's occupation Administrator 8110		H. HIGHEST SOURCE OF INCOME: 1. <input type="checkbox"/> Government, Municipalities or Public Corporations Employee 2. <input checked="" type="checkbox"/> Federal Government Employee 3. <input checked="" type="checkbox"/> Private Business Employee 4. <input type="checkbox"/> Retired/Pensioner 5. <input type="checkbox"/> Self-Employed (Indicate principal industry or business) 6. <input type="checkbox"/> Other		I. FILING STATUS AT THE END OF THE TAXABLE YEAR: 1. <input checked="" type="checkbox"/> Married (Fill in here <input checked="" type="checkbox"/> if you choose the optional computation and go to Schedule CO Individual) 2. <input type="checkbox"/> Individual taxpayer (Fill in and submit spouse's name and social security number if you are: <input type="checkbox"/> Married with a complete separation of property prenuptial agreement <input type="checkbox"/> Married not living with spouse) 3. <input type="checkbox"/> Married filing separately (Submit spouse's name and social security number above) GOVERNMENT CONTRACT: <input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse			
GO TO PAGE 2 TO DETERMINE YOUR REFUND OR PAYMENT.							
Refund		1. AMOUNT OVERPAID (Part 3, line 29. Indicate distribution on lines A, B, C and D) 01 1,780 00 A) To be credited to estimate tax for 2017 (01) 00 B) Contribution to the San Juan Bay Estuary Special Fund (02) 00 C) Contribution to the Special Fund for the University of Puerto Rico (03) 00 D) TO BE REFUNDED (If you want your refund to be deposited directly into an account, complete the Deposit Part) (04) 1,780 00					
Payment		2. AMOUNT OF TAX DUE (Part 3, line 29) (05) 00 3. Less: Amount paid (a) With Return or Electronic Transfer through a Certified Program (06) 00 (b) Interest (07) 00 (c) Subsidies and Penalties (08) 00 4. BALANCE OF TAX DUE (Subtract line 3(a) from line 2 and add lines 3(b) and 3(c)) (09) 00					
Deposit		AUTHORIZATION FOR DIRECT DEPOSIT OF REFUND Type of account: <input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings Routing/transit number 021502011 Account number 511073927 Account in the name of: ADONIS RUIZ NOGUERAS and NILDA MENDEZ MARCANO (Print complete name as it appears on your account. If married and filing jointly, include your spouse's name)					
I hereby declare under penalty of perjury that I have examined the information included in this return, schedules and other documents attached to it, and it is true, correct and complete. The declaration of the person that prepares this return (except the taxpayer) is based on the information available, and this information has been verified.							
Taxpayer's Signature SIGNED ELECTRONICALLY		Date 03/22/2017		Spouse's Signature SIGNED ELECTRONICALLY		Date 03/22/2017	
Specialist's Name (Print)		Name of the Firm or Business					
Specialist's Signature		Date		Self-employed Specialist (fill in here) <input type="checkbox"/>		Registration Number	
NOTE TO TAXPAYER: Indicate if you made payments for the preparation of your return: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If you answered "Yes", require the Specialist's signature and registration number.							

Translator's note: Source watermark reads "FILED ELECTRONICALLY" multiple times.

Verif. 0322220170813899E8A1131227

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Certified to be a correct and true translation from the source text in Spanish to the target language English.

11/NOVEMBER/2020 - Andreea I. Boscor ATA-certified Spanish-English #525556

By Targem Translations Inc.

BANCO POPULAR DE PUERTO RICO
P.O. BOX 362708
SAN JUAN PR 00936 -2708

[logo] **BANCO POPULAR**

ADONIS RUIZ NOGUEIRAS
AND/OR NILDA L MENDEZ MARCANO
URB MONTEMAR
3 CALLE B
FAJARDO PR 00738

REDACTED 3927
SAVINGS ALL THE TIME

62293

This statement covers your transactions from June 14, 2017, to July 17, 2017.

Page 1

SAVINGS

BALANCE INFORMATION

Opening balance	+ Credits	+ Interest	- Debits	- Charges	= Closing balance	Available balance
0.00	4,751.74	0.00	4,671.95	6.84	72.95	72.95

Average daily balance	Number of days in the cycle	Periodic rate	Annual percentage yield earned
375.60	33	0.00000000%	00.0000%

REGULAR AND ELECTRONIC CREDITS

Date	Description	Amount	Date	Description	Amount
06-15	Deposit XXXXX2190 Adventist Assoc. Payroll	949.67	06-23	E-Payment 552222039 Notice of credit	32.00
06-16	Deposit XXXXX2244 Dept. of the Treasury Refund	1,780.00	06-23	E-Payment 552222039 Notice of credit	31.00
06-19	E-Payment 511626420 Notice of credit	4.00	06-30	Deposit XXXXX2190 Adventist Assoc. Payroll	920.84
06-19	E-Payment 552222039 Notice of credit	3.00	07-11	E-Payment 511626420 Notice of credit	40.00
06-19	E-Payment 511626420 Notice of credit	2.00	07-14	Deposit XXXXX2190 Adventist Assoc. Payroll	989.23

REGULAR AND ELECTRONIC DEBITS

Date	Description	Amount	Date	Description	Amount
06-15	Payment 06-15 XXXXXXXXX7585 Total 5127 Velez Bayamón PR	10.00	06-26	Payment XXXXXXX0418 Synchrony Bank Cc Pymt	66.00
06-15	Payment 06-15 XXXXXXXXX7585 Taco Maker Bayamón PR	11.13	06-30	E-Payment XXXXXXX2039 Transfer to Savings Account	10.00
06-15	Payment 06-15 XXXXXXXXX7585 Taco Maker Bayamón PR	3.65	06-30	E-Payment XXXXXXX6420 Transfer to Savings Account	100.00
06-15	E-Payment XXXXXXX2039 Transfer to Savings Account	2.00	06-30	E-Payment XXXXXXX1136 Sears Master Card	50.00
06-15	E-Payment XXXXXXX6420 Transfer to Savings Account	40.00	06-30	E-Payment XXXXXXX5998 Prt/Claro	34.77
06-15	E-Payment XXXXXXX2039 Transfer to Savings Account	40.00	06-30	E-Payment XXXXXXX5034 Sewage Aqueduct Authority	23.71
06-16	Payment XXXXXXX0002 Popular Auto Direct Debit	425.73	07-03	Payment 324923001SMT2V Att Payment	313.46
06-16	Payment XXXXXXX9727 Bspr Loan Payment	403.15	07-05	Payment XXXXXXX0003 Popular Auto Direct Debit	362.63
06-19	ATH withdrawal 06-16 2790 BPPR Fajardo Pueblo	20.00	07-10	Payment 07-08 XXXXXXXXX7585 Econo Rial Fajard Fajardo PR	15.73
06-19	Payment 06-16 XXXXXXXXX7585 Total Bonjour Faj Fajardo PR	23.11	07-12	Payment XXXXXXX4851 Bspr Card Card Payment	50.00
06-19	E-Payment XXXXXXX8997 Transfer to Savings Account	1,650.00	07-14	E-Payment XXXXXXX6420 Transfer to Savings Account	50.00
06-19	E-Payment XXXXXXX6420 Transfer to Savings Account	100.00	07-14	E-Payment XXXXXXX2039 Transfer to Savings Account	15.00
06-23	E-Payment XXXXXXX2039 Transfer to Savings Account	3.00	07-17	Payment 07-15 XXXXXXXXX7585 Best Price Canóvanas PR	20.00

Notice: See important information at the end of this statement.

Certified to be a correct and true translation from the source text in Spanish to the target language English.

11/NOVEMBER/2020 - Andreea I. Boscor ATA-certified Spanish-English #525556

By Targem Translations Inc.

[logo] **BANCO POPULAR**

ADONIS RUIZ NOGUEIRAS

REDACTED 3927
SAVINGS ALL THE TIME

This statement covers your transactions from June 14, 2017, to July 17, 2017.

Page 2

REGULAR AND ELECTRONIC DEBITS

Date	Description	Amount
07-17	Payment XXXXX0002 Popular Auto Direct Debit	425.73

Date	Description	Amount
07-17	Payment XXXXX9727 Bspr Loan Payment	403.15

FEES

Date	Description	Amount
06-15	Late Fee	2.84

Date	Description	Amount
07/17	Savings Service Fee	4.00

SUMMARY OF FEES

Statement of July 2017	Total for this period	Accumulated yearly total
Overdraft fees	\$0.00	\$0.00
Overdraft fee adjustments	\$0.00	\$0.00
Cash refund fees	\$0.00	\$30.00
Cash return adjustments	\$0.00	\$0.00

MINIMUM BALANCE

Date	Description	Amount
06-26	Minimum balance this cycle	1.06

IMPORTANT NOTICE

THIS IS THE PERFECT MOMENT TO OPEN A USAVE.
USAVE IS AN ACCOUNT THAT ALLOWS YOU TO
SAVE FOR WHAT YOU WANT, WHEN YOU WANT
IT. YOU DECIDE. OPEN IT AT AN AGENCY OR AT
MY ONLINE BANK TODAY!

Notice: Your next statement of account will be on August 14, 2017.

Case:17-03283-LTS Doc#:13152-2 Filed:05/15/20 Entered:05/18/20 15:51:16 Desc:
Envelope Page 1 of 1

Adonis Ruiz Nogueiras
B-3 Calle B
Urb. Monte Mar
Fajardo PR 00738-4323



Secretaría (Clerk's Office)
Tribunal de Distrito de los Estados Unidos
Sala 150 Edificio Federal
San Juan (Puerto Rico) 00918-1767

RECEIVED & FILED
2020 MAY 15 PM 4:33
CLERK'S OFFICE
U.S. DISTRICT COURT
SAN JUAN, P.R.



T 718.384.8040
W TargemTranslations.com
E projects@targemtranslations.com
A 185 Clymer St. Brooklyn, NY 11211

TRANSLATOR'S CERTIFICATE OF TRANSLATION

Translation from: Spanish (Puerto Rico) into English (US)
TARGEM Translations Inc.

I, Andreea I. Boscor, ATA-certified Spanish-English #525556, acting as translator at TARGEM Translations Inc., a NEW YORK City corporation, with its principal office at 185 Clymer Street, Brooklyn, NY, 11211, USA, certify that:

the English translated document is a true and accurate translation of the original Spanish and has been translated to the best of my knowledge.

Original Document Name: Claim No. 2406 - ECF No. 13152 - Mailing Response (1)

Signed this 11th day of November 2020



Verify at www.atanet.org/verify

A handwritten signature in black ink, appearing to read "Andreea I. Boscor".

Andreea I. Boscor

